

This newsletter is organized to align the updates with Strategies from the *Laying a Foundation for Getting to Zero: California's Integrated HIV Surveillance, Prevention, and Care Plan* (Integrated Plan). The Integrated Plan is available on the Office of AIDS' (OA) website at www.cdph.ca.gov/Programs/CID/DOA/ CDPH%20Document%20Library/IP_2016_Final_ADA.pdf.

In This Issue:

- Strategy A
- Strategy J
- Strategy K

Staff Highlight:

OA is pleased to announce **Nanci Beams**, Chief Program Compliance and Reporting Section in the HIV Care Branch, has been selected as a 2020 Public Health Acknowledging My Efforts (PHAME) Individual Award Winner, in the PHAME category of Leadership. PHAME Awards are designed to recognize and celebrate the people behind the work of CDPH. Awards are presented in one of nine categories to include: Beyond the Call of Duty, Collaboration, Core Values, Customer Services, Innovation, Leadership, Outstanding Achievement in Public Health, Public Service, and Quality Improvement.

As Chief of the Program Compliance and Reporting Section, Nanci oversees two distinct functions. First, she administers the federal application and reporting process for several federal grants related to HIV/AIDS care and treatment totaling over \$150 million annually. Secondly, she leads the HIV/AIDS Medi-Cal Waiver program (MCWP); a program, in collaboration with the Department of Health Care Services (DHCS), which provides additional services to low income, HIV+ participants who are at risk for hospitalization or nursing home care.

Nanci is an effective leader, she is extremely knowledgeable and always encourages her team to be the best version of themselves. Not a day goes by when Nanci does not thank her staff for



both individual and team efforts, she constantly reminds the team how much she appreciates the work they do and how wonderful it is to work with such a competent and effective staff. Please join us in congratulating Nanci on this well-deserved recognition.

General Office Updates:

COVID-19:

OA is committed to providing updated information related to COVID-19. We have disseminated a number of documents in an effort to keep our clients and stakeholders informed.

Please refer to our <u>OA website</u> at www.cdph. ca.gov/programs/cid/doa/pages/oamain.aspx, to stay informed.

HIV/STD/HCV Integration Update:

As the lead state department in the COVID-19 response, the California Department of Public Health (CDPH) has re-directed hundreds of staff to this effort. Because of this, there is a temporary pause on the integration efforts of the OA, STD Control Branch, and Office of Viral Hepatitis Prevention until the Department gets back to normal. We have made tremendous progress in the past few months, establishing numerous action teams to define a future integrated organization. We do not want to lose this momentum, and we will not. We have the commitment of our contractor, who greatly understands the Department's predicament, to continue right where we are pausing, as soon as the COVID-19 related workload on our staff lets up.

Racial Justice and Health Equity:

The Racial & Health Equity (RHE) workgroup aims to gain insight and understanding of racial and health equity efforts throughout CDPH and take next steps towards advancing RHE in our work. Staff throughout OA, the STD Control Branch and the CDPH Office of Health Equity, are participating in discussions on how racial and health equity can be embraced, challenges in advancing RHE, and what support will be needed to be successful. The workgroup convenes every other month with monthly subgroup meetings.

The OA Prevention Branch collectively completed CA4Health's 21-Day Racial Equity & Social Justice Challenge (https://ca4health.org/). Prevention Branch managers have been joined by other managers in OA to work through the steps in Awake to Woke to Work: Building a Race Equity Culture (https://

www.equityinthecenter.org/wp-content/ uploads/2019/04/Equity-in-Center-Awake-Woke-Work-2019-final-1.pdf).

Prevention Branch staff are also reviewing our guidance, policies, staff recruitment, promotion and retention, among other factors, to heighten the centrality of racial justice and health equity in our work.

Several of OA's new initiatives focus on addressing health disparities. Funded California Harm Reduction Initiative (CHRI) (https:// harmreduction.org/our-work/california-harmreduction-initiative-chri/) grantees will center the voices of people who use drugs through increased participant involvement with program development and service delivery and paid program positions, and will establish strategies and action to address racial and health inequities affecting people of color who use drugs. OA is proud to add CHRI to our prevention strategies and increase California's harm reduction efforts to address the continued racial and social discrimination that California residents who use drugs experience.

<u>Contact Loris A. Mattox</u> at loris.mattox@cdph. ca.gov for additional information.

Strategy A: Improve Pre-Exposure Prophylaxis (PrEP) Utilization

PrEP Assistance Program (PrEP-AP):

As of August 31, 2020, there are 205 PrEP-AP enrollment sites covering 156 clinics that currently make up the PrEP-AP Provider network. A comprehensive list of the PrEP-AP Provider Network can be found at https://cdphdata.maps.arcgis.com/apps/webappviewer/index.html?id=6878d3a1c9724418aebfea96878 cd5b2.

Data on active PrEP-AP clients can be found in the tables at the top of page three.

Active PrEP-AP Clients by Age and Insurance Coverage: **PrEP-AP With PrEP-AP With PrEP-AP With PrEP-AP Only TOTAL** Medi-Cal Medicare **Private Insurance Current Age** Ν Ν % Ν % Ν 18 - 24 184 4% 168 4% 352 8% 25 - 341.260 29% 3 0% 1 0% 963 22% 2,227 50% 35 - 44 690 16% 4 0% 396 9% 1,089 25% ---45 - 64 7% 26 6% 308 1% 258 592 13% 65+ 8 0% 128 3% 14 0% 150 3% **TOTAL** 56% 159 4% 1,799 41% 100% 2,450 3 0% 4.410

| Active PrEP-AP Clients by Age and Race/Ethnicity: | | | | | | | | | | | | | | | | | | |
|---|--------|-----|-------|-----|---------------------------------|----|-------|----|--|----|--|----|-----------------------------------|----|--------------------|----|-------|------|
| | Latinx | | White | | Black or African American | | Asian | | American Indian or Alaskan Native | | Native Hawaiian/ Pacific Islander | | More Than One Race Reported | | Decline to Provide | | TOTAL | |
| Current Age | N | % | N | % | N | % | N | % | N | % | N | % | N | % | N | % | N | % |
| 18 - 24 | 145 | 3% | 93 | 2% | 34 | 1% | 47 | 1% | | | 4 | 0% | 9 | 0% | 20 | 0% | 352 | 8% |
| 25 - 34 | 1,008 | 23% | 680 | 15% | 166 | 4% | 230 | 5% | 2 | 0% | 6 | 0% | 37 | 1% | 98 | 2% | 2,227 | 50% |
| 35 - 44 | 528 | 12% | 359 | 8% | 71 | 2% | 76 | 2% | 3 | 0% | 3 | 0% | 9 | 0% | 40 | 1% | 1,089 | 25% |
| 45 - 64 | 240 | 5% | 259 | 6% | 39 | 1% | 40 | 1% | 2 | 0% | 1 | 0% | 3 | 0% | 8 | 0% | 592 | 13% |
| 65+ | 14 | 0% | 126 | 3% | 4 | 0% | 4 | 0% | 1 | 0% | | | 1 | 0% | | | 150 | 3% |
| TOTAL | 1,935 | 44% | 1,517 | 34% | 314 | 7% | 397 | 9% | 8 | 0% | 14 | 0% | 59 | 1% | 166 | 4% | 4,410 | 100% |

Both PrEP-AP charts prepared by: ADAP Fiscal Forecasting Evaluation and Monitoring (AFFEM) Section, ADAP and Care Evaluation and Informatics Branch, Office of AIDS. Client was eligible for PrEP-AP as of run date: 08/31/2020 at 12:13:05 AM
Data source: ADAP Enrollment System. Site assignments are based on the site that submitted the most recent application.

Strategy J: Increase Rates of Insurance/Benefits Coverage for PLWH or on PrEP

ADAP's Insurance Assistance Programs:

As of August 31, 2020, the number of ADAP clients enrolled in each respective ADAP Insurance Program are shown in the chart at the top of page four.

Strategy K: Increase and Improve HIV Prevention and Support Services for People Who Use Drugs

The National Harm Reduction Coalition (https://

harmreduction.org/) will launch self-paced online learning modules that groups and individuals can complete on their own schedule and terms. The learning management system will have a series of video content and trainings in a user-friendly format. Available trainings include, Foundations of Harm Reduction, Engaging People Who Use Drugs, and Overdose Prevention and Response. The Learning Lab launches, September 1st and can be found on their website.

CDPH authorized two syringe services programs in August. The Harm Reduction Coalition of Santa Cruz County is a community-led program committed to reducing harm and providing evidence-based education, advocacy, and direct

| ADAP Insurance Assistance Program | Number of Clients Enrolled | Percentage Change from July |
|---|-------------------------------|--------------------------------|
| Employer Based Health Insurance Premium Payment (EB-HIPP) Program | 674 | -3.3% |
| Office of AIDS Health Insurance Premium Payment (OA-HIPP) Program | 6,295 | +2.78% |
| Medicare Part D Premium Payment (MDPP) Program | 1,992 | +1.32% |
| Total | 8,961 | +2.18% |

services to all community members in Santa Cruz County. Bakersfield AIDS Project - The Exchange Program (TEP) will provide syringe services in Bakersfield, California. Bakersfield AIDS Project was established in 1993 and provides services and housing for people living with and at risk for HIV/AIDS and for lesbian, gay, bisexual, transgender, and questioning people.

<u>Service locations, hours and contact information</u> <u>for all state authorized sites</u> can be found on the OA website. (https://www.cdph.ca.gov/Programs/CID/DOA/Pages/OA_prev_secpapp.aspx).

For <u>questions regarding this issue of *The OA Voice*, please send an email to angelique. skinner@cdph.ca.gov.</u>